Page	of	Pages	Candidate or Committee Name:					
ELECT	ION ITEN	MIZED RECI	EIPTS			Reporting period ending		2012
FULL NAME OF CONTRIBUTOR Post Office Address (Alphabetical Order)			Post Office Address	Amount of Contribution	Date Received	Aggregate ✓ contributions to date for this election	If contribution <b>or aggregate* con</b> is over \$100 list: Occupation and Place of Busine	

<sup>\*</sup>List occupation and place of business if total contribution exceeds \$100 for primary **or** general election. RSA 664:6, I ✓ Aggregate year-to-date total for that contributor. List occupation and place of business if total exceeds \$100. RSA 664:6, I